

Health Consumers Queensland submission

Inquiry into Health and Other Legislation

Amendment Bill 2016

Queensland Parliament

Legal Affairs and Community Safety Committee

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About us

Health Consumers Queensland is the peak organisation representing the interests of health consumers and carers in the state. Health Consumers Queensland is a not-for-profit organisation and a registered health promotion charity and we believe in improving health outcomes for people in Queensland.

Consumers are people who use, or are potential users, of health services including their family and carers. Consumers may participate as individuals, groups, organizations of consumers, consumer representatives or communities.

Our priority focus is on consumer engagement that influences and leads improvements and delivers better health outcomes for all Queenslanders. We achieve this through our Queensland-wide health consumer network, tailored training and skills development programs, and maximising opportunities for consumer representation at all levels of the health system.

Consumer engagement is when health consumers actively participate in their own healthcare and in health policy, planning, service delivery and evaluation at service and agency levels.

OUR MISSION

Health Consumers Queensland empowers Queensland consumers to lead and drive better health outcomes.

OUR GUIDING PRINCIPLES:

Health Consumers Queensland is committed to:

- Influencing individual and system change in health services through ensuring the consumer perspective is central in the planning, design, delivery, monitoring and evaluation at all levels.
- Partnerships and collaboration with organisations, service providers and stakeholders.
- Quality, safe, affordable, timely and accessible services that deliver the right care, at the right time and the right place.

DIVERSITY

All people have a right to affordable and accessible health services that meet all of their physical, social, emotional and cultural preferences.

Health Consumers Queensland focus on increasing the voices of vulnerable population groups and assist them to understand how they can have a voice in developing health services. With access and equity in mind, we partner with people and organisations with a focus on the following:

- Culturally and linguistically diverse (CALD)
- Physical and intellectual disability
- Lived mental health experience
- Socially and geographically isolated
- Socioeconomically disadvantaged

Recommendations

Recommendation 1: That the Criminal Code be amended to standardise the age of consent for sexual intercourse to 16 years and replace references to *sodomy* with *anal intercourse*.

Recommendation 2: That the Hospital and Health Boards Act 2011 be amended to facilitate general practitioners, nurses, midwives and allied health professionals having access to the Queensland Health database *The Viewer*. Education for health professionals and ensuring patient access must be part of the project's scope.

Recommendation 3: Due to issues of privacy and consent, we do not support the amendment to the Hospital and Health Boards Act 2011 that seeks to enable more efficient disclosure of confidential patient information for research purposes.

Recommendation 4: We recommend the Public Health Act 2005 be amended to change the definition of "person" to include information of both living and deceased persons.

Recommendation 5: We recommend the Public Health Act 2005 be amended to enable schools to share student information with school immunisation and oral health service providers to facilitate increased access to the School Immunisation Program and School Dental Program, and greater informed decision making around immunisation.

Recommendation 6: That the Queensland Institute of Medical Research Act 1945 be amended to facilitate the payment of bonuses to successful discoverers or inventors.

Standardising the age of consent and replace references to sodomy with anal intercourse

Health Consumers Queensland supports the vision statement within the Draft Queensland Sexual Health Strategy 2016–2021 *that all Queenslanders experience optimal sexual and reproductive health*¹.

We also support the vision of My health, Queensland's future: Advancing health 2026 that *by 2026, Queenslanders will be amongst the healthiest people in the world*².

As an organisation, we are committed to quality, safe, affordable, timely and accessible services that delivery the right care, at the right time and the right place. Stigma, illegality or shame that result in non-disclosure of sexual behaviours especially by young people, results in reduced treatment and prevention by reducing their access to appropriate services.

Recommendation 1: That the Criminal Code be amended to standardise the age of consent for sexual intercourse to 16 years and replace references to *sodomy* with *anal intercourse*.

¹ Draft Queensland Sexual Health Strategy 2016–2021
<https://www.health.qld.gov.au/publications/portal/health-strategies/sexual-health-strategy-consult.pdf>

² My health, Queensland's future: Advancing health 2026
<https://www.health.qld.gov.au/publications/portal/health-strategies/vision-strat-healthy-qld.pdf>

Facilitating access to patient data

As an organisation we advocate for the removal of barriers to health professionals being able to share data, within robust clinical governance frameworks which protect health consumers' privacy and support consumers' shared access to their data. A up-to-date and accurate shared health record ensure more connected health care, reduces the unnecessary duplication of tests and procedures and ensures important information such as test results, allergies, conditions, medications can be seen by all relevant health professionals.

We recommend that the legislation be expanded to facilitate access to the viewer from no only general practitioners but also nurses, midwives and allied health professionals.

Targeted education and training of all health professionals (including registrars in hospitals) is needed to ensure important information is uploaded onto The Viewer.

Consideration should also be given to mirroring the upload of information to a patient's personally controlled electronic health record (My Health Record).

Recommendation 2: That the Hospital and Health Boards Act 2011 be amended to facilitate general practitioners, nurses, midwives and allied health professionals having access to the Queensland Health database *The Viewer*. Education for health professionals and ensuring patient access must be part of the project's scope.

Protecting patient confidentiality in research

The Explanatory Notes³ to this this Bill say that:

Substitute decision-making frameworks apply, including the Queensland Civil and Administrative Tribunal under the Guardianship and Administration Act 2000 (the Guardianship and Administration Act), and a statutory health attorney for an adult's health matter under the Powers of Attorney Act 1998 (Powers of Attorney Act), to obtain consent to a patient's participation in research. However, it is not clear that the substitute decision-maker can consent on the patient's behalf to confidential patient information being disclosed.

We understand that this Bill seeks to remove the existing safeguard of a chief executive having to consider the public interest and individual privacy before sharing information about a patient for a research project. The rights of consumers, particularly those who are most vulnerable (who may not have capacity to consent eg. being in intensive care or dementia and do not have a substitute decision maker) need more consideration than just ethics approval and approval for commencement of a research project.

Recommendation 3: Due to issues of privacy and consent, we do not support the amendment to the Hospital and Health Boards Act 2011 that seeks to enable more efficient disclosure of confidential patient information for research purposes.

³ p.4 Explanatory Notes to Health and Other Legislation Amendment Bill 2016
https://www.legislation.qld.gov.au/Bills/55PDF/2016/B16_0068_Health_and_Other_Legislation_Amendment_Bill_2016E.pdf

Access to immunisation and dental services

We support changes to the Bill which seek to enable greater data sharing between the providers of immunisation and dental services, and schools, as exists in other states and territories.

Particularly in any public health campaign that seeks to increase immunisation rates, it is important that all parents (including those from an Aboriginal and/or Torres Strait Islander or culturally and linguistically diverse background) can have open discussions with health care providers, their concerns listened to, they be given evidence based information and then supported to make informed decisions.

Recommendation 5: We recommend the Public Health Act 2005 be amended to enable schools to share student information with school immunisation and oral health service providers to facilitate increased access to the School Immunisation Program and School Dental Program, and greater informed decision making around immunisation.

Outcomes for consumers through research

We support the motivation behind the proposed change to the QIMR Act, in order more easily attract and retain world-class researchers who can produce the best outcomes for Queensland research dollars. We would support bonuses being awarded within a clinical governance framework similar to that of the Walter and Eliza Hall Medical Research Institute, as cited in the Explanatory Notes to this Bill (Board approval and a commercialisation committee).

Recommendation 6: That the Queensland Institute of Medical Research Act 1945 be amended to facilitate the payment of bonuses to successful discoverers or inventors.